

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>				
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Friends of Jay Breneman</i>									
STREET ADDRESS <i>P.O. Box 282</i>									
CITY <i>Erie</i>		STATE <i>PA</i>	ZIP CODE <i>16512-</i>						
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <i>MAYOR, ERSE</i>	DISTRICT NO.	PARTY <i>DEM</i>	DATE OF ELECTION					
				MO. <i>5</i>	DAY <i>16</i>	YEAR <i>17</i>			
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY					
2ND FRIDAY PRE-PRIMARY	2.	MO. <i>06</i>	DAY <i>05</i>	YEAR <i>2017</i>	TO	MO. <i>01</i>	DAY <i>31</i>	YEAR <i>2018</i>	2018 JAN 31 PM 4:48 KE
30 DAY POST-PRIMARY	3.	CASH BALANCE AT END OF REPORTING PERIOD:		\$ <i>0</i>					
6TH TUESDAY PRE-ELECTION	4.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <i>0</i>					
2ND FRIDAY PRE-ELECTION	5.	AMENDMENT REPORT?		YES	NO <input checked="" type="checkbox"/>				
30 DAY POST-ELECTION	6.	TERMINATION REPORT?		YES	NO				
ANNUAL REPORT	7. <input checked="" type="checkbox"/>								

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates' Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

31st DAY OF *January* 20*18*

Kimberly S. Alexander
 SIGNATURE

MY COMMISSION EXPIRES *10 31 2019*
 MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

JAY BRENEMAN
 PRINTED NAME

814
 AREA CODE

580-8683
 DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

_____ DAY OF _____ 20____

 SIGNATURE

MY COMMISSION EXPIRES _____
 MO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE

 DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Kimberly S. Alexander, Notary Public
 City of Erie, Erie County
 My Commission Expires On _____
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES